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 About Minority Health Cooperative Agreements Reports / Publications Partnerships Racial & Ethnic Minority Populations Training Opportunities	<h2 style="text-align: center;">Centers for Disease Control and Prevention (CDC) FY 2002 and FY 2003 Implementation Plans for the White House Initiative on Asian Americans and Pacific Islanders (AAPI)</h2> <h3>Strategic Goal #6: Recognize and include Native Hawaiians and Pacific Islander in federal programs and services.</h3> <p>Objective 1: Utilize cooperative agreements (COAG) to fund TB prevention, control, and laboratory efforts in the Pacific Islands Basin and Hawaii.</p> <p>Strategies:</p> <ol style="list-style-type: none"> Send out, promote, and promulgate the COAG. Conduct routine site visits to discuss goals and objectives. <p>Time Frame: August 20, 2002 and 2003 (5 years competitive cycles).</p> <p>Performance Measures:</p> <ol style="list-style-type: none"> Goals and objectives to promote TB prevention and control established. Routine site visits conducted. <p>Funding/Activity Type: N/A, B/Continue through cooperative agreement funds.</p> <p>Lead Entity and Contact Person: Valerie Richmond-Reese, Public Health Analyst, National Center for HIV, STD, and TB Prevention, 1600 Clifton Road, N.E., MS E-07, Atlanta, Georgia 30333, Telephone: (404) 639-8996, Facsimile: (404) 639-8629, Electronic mail: var1@cdc.gov.</p> <p>Monitoring Official: Paul Tribble, supervisory public health advisor, CDC, 1600 Clifton Road, N.E., MS E-10, Atlanta, Georgia 30333, Telephone: (404) 639-4207, Facsimile: (404) 639-8958, Electronic mail: ptribble@cdc.gov, and Andy Heetderks, Program Consultant, CDC, 1600 Clifton Road, N.E., MS E-10, Atlanta, Georgia 30333, Telephone: (404) 639-8130, Facsimile: (404) 639-8958, Electronic mail: ajh1@cdc.gov.</p>	<p>Reports & Publications Section Menu</p> <ul style="list-style-type: none"> ■ CDC FY 2002 and FY 2003 IP for the White House Initiative on AAPI ■ PDF Print Version ■ Get Adobe Reader ■ HAA EEHAI 2002 ■ HHS OMH.C Health Care ■ Diversity in Health Care ■ CDC Guiding Principles on Consultation
<div style="border: 1px solid black; padding: 5px; text-align: center; background-color: #005596; color: white; width: fit-content; margin: 10px auto;">CAMICC</div> <div style="border: 1px solid black; padding: 5px; text-align: center; background-color: #FFCC00; width: fit-content; margin: 10px auto;">SEARCH OMH Web site</div>		

Objective 2:

Further develop and strengthen the relationship between CDC/DHAP and the Native Hawaiian and Pacific Islander HIV prevention partners currently funded through HIV prevention cooperative agreement.

Strategies:

- a. Increase mechanisms for communication and feedback from Native Hawaiian and Pacific Islanders HIV prevention programs that will ensure more representation and inclusion.
- b. Conduct routine site visits.

Time Frame: September 17, 2002 and 2003.

Performance Measures:

Relationship between CDC/DHAP and the Native Hawaiian and Pacific Islander HIV prevention partners developed. HIV prevention cooperative agreement funded.

Funding/Activity Type:

N/A, B/Cont.

Lead Entity and Contact Person:

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Monitoring Official:

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Objective 3:

Provide technical consultation to the Pacific Islander Health Officers Association (PIHOA).

Strategy:

Provide technical advice and laboratory capacity to support the investigations of Hepatitis B and Hepatitis C control programs in the Pacific jurisdictions.

Time Frame: September 2002 and 2003.

Performance Measures:

Supplies for laboratory services purchased; laboratory technical capacity support and investigations of Hepatitis B and C provided.

Funding/Activity Type:

None, B/Cont.

Lead Entity and Contact Person:

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Monitoring Official:

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N.E., MS G-37, Telephone: (404) 371-5900, Facsimile: (404) 371-5221, Electronic mail: gca3@cdc.gov / roc4@cdc.gov.

Objective 4:

Provide National Research Council (NRC) Post-doctoral visiting fellowship program. The purpose of this associate ship-training program is to provide education and training to help alleviate the critical shortage of occupational safety and health manpower.

Strategies:

- a. Conduct the Resident Research Associate Ship Programs in cooperation with the NIOSH laboratories in Cincinnati, Morgantown, Spokane, and Pittsburgh.
- b. The Research Council conducts a national competition to recommend and make awards to outstanding scientists and engineers at recent postdoctoral and experienced senior levels for tenure as guest researchers at NIOSH.

Time Frame: July 31, 2002 and 2003 (project period 2002 to 2005).

Performance Measures:

The critical shortage of occupational safety and health manpower decreased.

Funding/Activity Type:

\$16,309, A/Cont.

Lead Entity and Contact Person:

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Monitoring Official:

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Objective 5:

Demonstrate evidence of AAPI women being screened through minimum data elements reported twice yearly by each screening program to the National Breast and Cervical Cancer Early Detection Program (NBCCEDP).

Strategy:

In collaboration with Departments of Health, provide breast and cervical cancer screening in Hawaii, American Samoa, CNMI, Guam and Palau.

Time Frame: September 2002 and 2003.

Performance Measure:

AAPI women in the U.S.- associated Pacific jurisdictions screened.

Funding/Activity Type:

\$1,039,888 to Hawaii, \$165,093 to American Samoa, \$662,074 to Palau, \$134,267 to CNMI, \$400,000 to Guam, B/Cont.

Lead Entity and Contact Person:

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Objective 6:

Preventive Health and Health Services Block Grant to support categorical programs to states that have insufficient funds.

Strategys:

Fund at least 33 health problems and 100 health status objectives of Healthy People 2010 in the areas of breast and cervical cancer, diabetes, HIV/AIDS prevention, nutrition, etc.

Time Frame: September 2002 and 2003.

Performance Measures:

GPRA measure: 85 percent of the total required data from all programs.

Funding/Activity Type:

\$1,249,963 to Hawaii, \$323,537 to Guam, \$88,860 to American Samoa, \$31,143 to Republic of Palau, \$61,172 to CNMI, \$107,070 to FSM, and \$42,521 to RMI, B/Cont.

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